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State/Territory Name: South Carolina

State Plan Amendment (SPA) #: 21-0003

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services

601 E. 12th St., Room 355

Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

October 12, 2021

Robert M. Kerr

Director

South Carolina Department of Health and Human Services

Post Office Box 8206

Columbia, SC 29202-8206

Re: South Carolina State Plan Amendment (SPA) 21-0003

Dear Mr. Kerr:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 21-0003. This amendment proposes to add medication-assisted treatment (MAT) as a mandatory benefit in the Medicaid state plan. This letter is to inform you that South Carolina's Medicaid SPA Transmittal Number 21-0003 was approved on September 30, 2021 effective October 1, 2020 until September 30, 2025, pursuant to 1905(a)(29) of the Social Security Act and Section 1006(b) of the SUPPORT Act.

Section 1006(b) of the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities Act ("SUPPORT Act"), signed into law on October 24, 2018, amended section 1902(a)(10)(A) of the Social Security Act (the Act) to require state Medicaid plans to include coverage of MAT for all individuals eligible to enroll in the state plan or waiver of the state plan. Section 1006(b) also added a new paragraph 1905(a)(29) to the Act to include the new required benefit in the definition of "medical assistance" and to specify that the new required benefit will be in effect for the period beginning October 1, 2020, and ending September 30, 2025.

Section 1006(b) of the SUPPORT Act also added section 1905(ee)(1) to the Act to define MAT, for purposes of the new required coverage, as:

. . . all drugs approved under section 505 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355), including methadone, and all biological products licensed under section 351 of the Public Health Service Act (42 U.S.C. 262) to treat opioid use disorders; and[,] . . . with respect to the provision of such drugs and biological products, counseling services and behavioral therapy.

Pursuant to section 1135(b)(5) and/or 1135(b)(1)(C) of the Act, due to the COVID-19 public health emergency (PHE), CMS issued an approval letter on March 16, 2021 allowing South Carolina to modify the SPA submission requirements at 42 C.F.R. 430.20, to allow the state to

submit a SPA implementing section 1905(a)(29) of the Act by March 31, 2021 that would take effect on October 1, 2020.

Pursuant to section 1135(b)(5) and/or 1135(b)(1)(C) of the Act, due to the COVID-19 PHE, CMS issued an approval letter on March 16, 2021 allowing South Carolina to modify the public notice time frames set forth at 42 C.F.R. 447.205, in order to obtain an effective date of October 1, 2020 for its SPA implementing statewide methods and standards for setting payment rates for the benefit described at section 1905(a)(29) of the Act. The state issued public notice on February 18, 2021.

CMS conducted our review of your submittal according to statutory requirements in Title XIX of the Act and implementing regulations.

If you have any questions, please contact William Pak at (404) 562-7407 or via email at William.Pak@cms.hhs.gov.

Sincerely,

James G. Scott, Director
Division of Program Operations

cc: Sheila Chavis
Nicole Mitchell Threatt
Deirdra T. Singleton

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL		1. TRANSMITTAL NUMBER: 21-0003	2. STATE South Carolina
FOR: HEALTH CARE FINANCING ADMINISTRATION		3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES		4. PROPOSED EFFECTIVE DATE October 1, 2020	
5. TYPE OF PLAN MATERIAL (Check One):			
<input type="checkbox"/> NEW STATE PLAN <input type="checkbox"/> AMENDMENT TO BE CONSIDERED AS NEW PLAN <input checked="" type="checkbox"/> AMENDMENT			
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)			
6. FEDERAL STATUTE/REGULATION CITATION: 42 CFR Section 8.2		7. FEDERAL BUDGET IMPACT: a. FFY 2021 \$0 (No additional costs expected as the MAT benefit and related Behavioral health services are already being covered under OTP and RBHS; this applies to FFY 2021 and FFY 2022) b. FFY 2022 \$0	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Attachment 3.1-A Limitation Supplement, page 6b Attachment 4.19-B, page 7 (New Page) Supplement 4 to Attachment 3.1-A, Enclosure 8, 9 (pages 1,2,3,4), 10 & 11 (New Pages), Enclosure 9 (pages 5,6,7)		9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): Attachment 3.1-A Limitation Supplement, Page 6b	
10. SUBJECT OF AMENDMENT: To cover, implement, and reimburse Medicaid mandated MAT services effective October 1, 2020 that is planned to sunset September 30, 2025.			
11. GOVERNOR'S REVIEW (Check One):			
<input type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED <input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL		<input checked="" type="checkbox"/> OTHER, AS SPECIFIED: Mr. Phillip was designated by the Governor to review and approval all State Plans.	
12. SIGNATURE OF STATE AGENCY OFFICIAL: 		16. RETURN TO:	
13. TYPED NAME: T. Clark Phillip			
14. TITLE: Acting Director			
15. DATE SUBMITTED: March 31, 2021			
FOR REGIONAL OFFICE USE ONLY			
17. DATE RECEIVED: March 31, 2021		18. DATE APPROVED: September 30, 2021	
PLAN APPROVED – ONE COPY ATTACHED			
19. EFFECTIVE DATE OF APPROVED MATERIAL: October 1, 2020		20. SIGNATURE OF REGIONAL OFFICIAL:	
21. TYPED NAME: James G. Scott		22. TITLE: Director, Division of Program Operations	
23. REMARKS: Pen and ink change authorized by state on September 1, 2021 to box 8 to include Enclosure 9 (pages 5,6,7) on Supplement 4 to Attachment 3.1-A			

13d. **REHABILITATIVE SERVICES**

Rehabilitative services are available only to Medicaid beneficiaries who meet the medical necessity criteria as outlined in the policy manual for these services. Medical necessity criteria may differ between individual services. Except where indicated, all services apply to both adults and children. The Division of Medicaid covers all medically necessary services for EPSDT-eligible beneficiaries ages birth to twenty-one (21) in accordance with 1905(a) of the Act, without regard to service limitations. Rehabilitative services are provided to, or directed exclusively toward, mental health and/or substance use disorder treatment for the Medicaid eligible beneficiary. Services are provided by qualified service providers for the purpose of ameliorating disabilities, improving the beneficiary's ability to function independently, and restoring maximum functioning through the use of diagnostic and restorative services.

For the period of October 1, 2020 through September 2025 coverage of MAT services can be found at 1905(a) (29).

a) Staff Qualifications

Rehabilitative services are medical or remedial services that have been recommended by a physician or other licensed practitioner of the healing arts (LPHA) within the scope of their practice, under South Carolina State Law and as may be further determined by the South Carolina Department of Health and Human Services (SCDHHS) for maximum reduction of physical or mental disability and restoration of a beneficiary to their best possible functional level. Services are provided by qualified clinical professionals and paraprofessionals as listed in the Staff Qualifications chart. Services are authorized by LPHA staff: Physician, Psychiatrist, Psychologist, Physician's Assistant, Registered Nurse with a Master's degree in Psychiatric Nursing, Advanced Practice Registered Nurse, Independent Social Worker - Clinical Practice, Marriage and Family Therapist, Licensed Master Social Worker (see Medicaid RBHS staff qualification table for guidance on provider type for this credential), Licensed Professional Counselor and Licensed Psycho-Educational Specialist.

b) Service Limitations

Service limitations on scope, amount, duration, frequency, location of service, and/or other specific criteria described in coverage policies may be exceeded as medically necessary for all services. The provider must submit documentation that addresses the need for additional services. The Medicaid beneficiary must meet the medical necessity criteria for receipt of each requested service. The beneficiary must be reassessed to determine medical necessity before prior approval.

c) Freedom of Choice for the Beneficiaries

Medicaid beneficiaries will have free choice of any qualified licensed, unlicensed and paraprofessional Medicaid providers. The provider must assure that the provision of services will not restrict the beneficiary's freedom of choice and it is not in violation of section 1902(a) (23) of the Social Security Act.

d) Provider Qualifications

To participate in the South Carolina Medicaid Program, applicants or providers must meet appropriate federal and state requirements, outlined in the SCDHHS provider enrollment policy and the following:

- Complete an online provider enrollment application and agreement and submit necessary supporting documentation. Only state agencies are required to sign a contractual agreement in addition to the provider enrollment agreement. Accept the terms and conditions of the online application by electronic signature.
- If required by the services they will be providing,
 - i. be licensed by the appropriate licensing body,
 - ii. certified by the standard-setting agency,
 - iii. and continuously meet these requirements.
- Unlicensed and Paraprofessionals are not enrolled providers with a provider number; they work under the supervision of an enrolled provider.
- Obtain a National Provider Identifier (NPI) and share it with SCDHHS. Refer to <http://nppes.cms.hhs.gov> for additional information about obtaining an NPI.

29. Medication-Assisted Treatment (MAT) Program Services

Effective October 1, 2020, the Medicaid Agency will implement the Medication-Assisted Treatment (MAT) Program. The MAT Program provides medically necessary drugs as accredited by the Substance Abuse and Mental Health Services Administration (SAMHSA) as well as access to counseling services and behavioral therapy to eligible Medicaid beneficiaries with a diagnosis of opioid use disorder (OUD). The drugs covered under this benefit include all formulations of MAT drugs and biologicals for OUD that are approved under section 505 of the Federal Food, Drug, And Cosmetic Act (21 U.S.C. 355) and all biological products licensed under section 351 of the Public Health Service Act (42 U.S.C. 262). Counseling and behavioral services covered under the MAT program will include Individual therapy, Peer Support Services, and Crisis Intervention Services. Provision of MAT behavioral services noted above must be consistent with Section 1905(a)(29) of the Act.

Practitioners eligible to provide counseling and behavioral services described above are those eligible to provide Rehabilitative Behavioral Health Services as defined in the State Medicaid Plan.

Except as otherwise noted in the plan, state-developed fee schedule rates for the drugs and counseling and behavioral services covered under the MAT Program are the same for both governmental and private providers. The description of the fee schedule payment methodologies can be found in sections 5 (Physicians), 6d (CRNA, etc.), 9 (OTP), 12a (Drugs), and 13d (Behavioral Services). The agency's MAT Program fee schedule rates are those in effect as of October 1, 2020 and is effective for services provided on or after that date. All rates are published on the agency's website at www.scdhhs.gov.

The reimbursement for unbundled prescribed drugs and biologicals used to treat opioid use disorder will be reimbursed using the same methodology as described for prescribed drugs located in Attachment 4.19-B pages 3c and 3d, for drugs that are dispensed or administered.

The MAT Program sunsets September 30, 2025.

SC 21-0003
EFFECTIVE DATE: 10/01/20
APPROVAL DATE: 09/30/21
SUPERSEDES: New Page

State of South Carolina

1905(a)(29) Medication-Assisted Treatment (MAT)

Citation: 3.1(a)(1) Amount, Duration, and Scope of Services: Categorically Needy
(Continued)

1905(a)(29) ___X___MAT as described and limited in Supplement 4 to Attachment 3.1-A.

ATTACHMENT 3.1-A identifies the medical and remedial services provided to the categorically needy.

TN No. 21-0003

Approval Date 09/30/21

Effective Date 10/01/20

Supersedes

TN No: New Page

State of South Carolina

1905(a)(29) Medication-Assisted Treatment (MAT)

Amount, Duration, and Scope of Medical and Remedial Care Services Provided to the Categorically Needy (continued)

i. General Assurance

MAT is covered under the Medicaid state plan for all Medicaid beneficiaries who meet the medical necessity criteria for receipt of the service for the period beginning October 1, 2020, and ending September 30, 2025.

ii. Assurances

a. The state assures coverage of Naltrexone, Buprenorphine, and Methadone and all of the forms of these drugs for MAT that are approved under section 505 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355) and all biological products licensed under section 351 of the Public Health Service Act (42 U.S.C. 262).

b. The state assures that Methadone for MAT is provided by Opioid Treatment Programs that meet the requirements in 42 C.F.R. Part 8.

c. The state assures coverage for all formulations of MAT drugs and biologicals for OUD that are approved under section 505 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355) and all biological products licensed under section 351 of the Public Health Service Act (42 U.S.C. 262).

iii. Service Package

The state covers the following counseling services and behavioral health therapies as part of MAT.

a) Please set forth each service and components of each service (if applicable), along with a description of each service and component service.

Each of the following services can be provided to specifically treat beneficiaries with Opioid Use Disorders:

1. Behavioral Health Screening (BHS):

The purpose of this brief screening is to provide early identification of opioid use disorders to facilitate appropriate referral for assessment and/or treatment services.

2. Diagnostic Assessment (DA):
 - a. Diagnostic Assessment without Medical: The purpose of this face-to-face assessment is to determine the need for MAT to treat OUD, to establish or confirm a diagnosis (diagnoses), to assist in the development of an individualized plan of care based upon the beneficiary's strengths and deficits, or to assess progress in and need for continued treatment. This assessment includes a comprehensive bio-psychosocial interview and review of relevant psychological, medical, and educational records.
 - b. Diagnostic Assessment with Medical: When a determination of the appropriateness of initiating or continuing the use of MAT for OUD is required, the diagnostic assessment must be carried out by a physician/psychiatrist or advanced practice registered nurse with prescriptive authority.
3. Service Plan Development (SPD): The purpose of this service is the development of an individual plan of care (IPOC) for the beneficiary. The IPOC, which may be developed by an interdisciplinary team, establishes the beneficiary's needs, goals, and objectives, and identifies appropriate treatment/services needed by the beneficiary to meet those goals. An interdisciplinary team is typically composed of the beneficiary, his/her family and/or other individuals significant to the beneficiary, treatment providers, and care coordinators. The IPOC will incorporate information gathered during screening and assessment. The IPOC will be person/family centered and the beneficiaries must be given the opportunity to determine the direction of his/her IPOC. An interdisciplinary team may be responsible for periodically reviewing progress made toward goals and modifying the IPOC as needed.
4. Individual Psychotherapy (IP): The purpose of this face-to-face intervention is to assist the beneficiary in improving his/her emotional and behavioral functioning. The therapist assists the individual in identifying maladaptive behaviors and cognitions, identifying more adaptive alternatives, and learning to utilize those more adaptive behaviors and cognitions.
5. Group Psychotherapy (GP): The purpose of this face-to-face intervention is to assist several beneficiaries, who are addressing similar issues, in improving their functioning. The group process allows members to offer each other support, share common experiences, identify strategies that have been successful for them, and to challenge each other's behaviors and cognitions. The therapist guides the group to ensure that the process is productive for all members and focuses on identified issues.

6. Family Psychotherapy (FP): The purpose of this face-to-face intervention is to address the beneficiary's relationship with his/her family unit. The therapist assists the family members in developing a greater understanding of the beneficiary's opioid use disorders and mental health disorders and appropriate treatment for this disorder, identifying maladaptive interaction patterns between family members and how they contribute to the beneficiary's impaired functioning, and identifying and developing competence in utilizing more adaptive patterns of interaction. Treatment is focused on changing the family dynamics, reducing and managing conflict, improving interaction and communication, and promoting the family's support to facilitate the beneficiary's progress. Services can be rendered with or without the beneficiary present, but the beneficiary's issues must be the main focus of the discussion. This service provides guidance to the family or caregiver on navigating systems that support individuals with opioid use disorders and mental health disorders.
7. Crisis Management (CM): The purpose of this face-to-face, or telephonic, short-term service is to assist a beneficiary, who is experiencing a marked deterioration of functioning related to a specific precipitant, in restoring his/her level of functioning. The goal of this service is to maintain the beneficiary in the least restrictive, clinically appropriate level of care. The clinician must assist the beneficiary in identifying the precipitating event, in identifying personal and/or community resources that he/she can rely on to cope with this crisis, and in developing specific strategies to be used to mitigate this crisis and prevent similar incidents.
8. Peer Support Service (PSS): The purpose of this service is to allow people with similar life experiences to share their understanding to assist beneficiaries in their recovery from opioid use disorders and mental health disorders. This service is person centered with a recovery focus and allows beneficiaries the opportunity to direct their own recovery and advocacy process. The Peer Support Specialist will utilize her/his own experience and training to assist the beneficiary in understanding how to manage her/his illness in their daily lives by helping them to identify key resources, listening and encouraging beneficiaries to cope with barriers, working towards their goals, providing insight, and sharing information on services and empowering the beneficiary to make healthy decisions. The unique relationship between the Peer Support Specialist and the beneficiary fosters understanding and trust in beneficiaries who otherwise would be alienated from treatment. The beneficiary's plan of care determines the focus of this service.

- b) Please include each practitioner and provider entity that furnishes each service and component service.
- a. Rehabilitative Behavioral Health Providers (to include the local county authority substance use disorder treatment programs)
 - b. Licensed Independent Practitioners
 - c. Community Mental Health Centers (SC Department of Mental Health)
 - d. Medical University of South Carolina outpatient clinics
- c) Please include a brief summary of the qualifications for each practitioner or provider entity that the state requires. Include any licensure, certification, registration, education, experience, training and supervisory arrangements that the state requires.

Staff Qualifications Providers of service must fulfill the requirements for South Carolina licensure/certification and appropriate standards of conduct by means of evaluation, education, examination, and disciplinary action regarding the laws and standards of their profession as promulgated by the South Carolina Code of Laws and established and enforced by the South Carolina Department of Labor Licensing and Regulation. Professionals, who have received appropriate education, experience and have passed prerequisite examinations as required by the applicable state laws and licensing/certification board and additional requirements as may be further established by DHHS, may be qualified to provide mental health and/or substance use disorder services. The presence of licensure/certification means the established licensing board in accordance with SC Code of Laws has granted the authorization to practice in the state. Licensed professionals must maintain a current license and/or certification from the appropriate authority to practice in the State of South Carolina and must be operating within their scope of practice.

PROFESSIONALS

Psychiatrist Doctor of medicine or osteopathy and has completed a residency in psychiatry Licensed by SC Board of Medical Examiners —Behavioral Health Screening, Diagnostic Assessment, Service Plan Development, Individual Psychotherapy, Group Psychotherapy, Family Psychotherapy, Crisis Management

Physician Doctor of medicine or osteopathy Licensed by SC Board of Medical Examiners —Behavioral Health Screening, Diagnostic Assessment, Service Plan Development, Individual Psychotherapy, Group Psychotherapy, Family Psychotherapy, Crisis Management

Physician Assistant (PA) Completion of an educational program for physician assistants approved by the Commission on Accredited Allied Health Education Programs Licensed by SC Board of Medical Examiners Physician with permanent SC license, physically present at least 75% of the time the PA is providing services. —Behavioral Health Screening, Diagnostic Assessment, Service Plan Development, Individual Psychotherapy, Group Psychotherapy, Family Psychotherapy, Crisis Management

Advanced Practice Registered Nurse (APRN) Doctoral, post-nursing master's certificate, or a minimum of a master's degree that includes advanced education composed of didactic and supervised clinical practice in a specific area of advanced practice registered nursing Licensed by SC Board of Nursing; must maintain national certification, as recognized by the board, in an advanced practice registered nursing specialty A supervising physician who provides consultation and operates within approved written protocols —Behavioral Health Screening, Diagnostic Assessment, Service Plan Development, Individual Psychotherapy, Group Psychotherapy, Family Psychotherapy, Crisis Management

Psychologist Doctoral degree in psychology Licensed by SC Board of Psychology Examiners —Behavioral Health Screening, Diagnostic Assessment, Service Plan Development, Individual Psychotherapy, Group Psychotherapy, Family Psychotherapy, Crisis Management

Licensed Psycho-Educational Specialist Hold a Master's degree plus thirty hours or Master's degree or specialist degree that includes sixty hours or ninety quarter hours or a Doctoral degree in psychology. Complete 3 graduate classes in psychopathology (abnormal psychology, abnormal behavior, and etiology dynamics). Complete 3 graduate classes diagnostic psychopathy and serve as a certified school psychologist for 2 years in a school and be certified by SCDE as a school psychologist level II or III. Must have a passing score (600 or above) on the ETS School Psychology exam (Praxis). Also must be licensed by the SC Board of Examiners for Licensure of Professional Counselors, Marriage and Family Therapists and Psycho-Educational Specialists. Licensed by SC Board of Examiners for Licensure or Professional Counselors, Marriage and Family Therapists and Psycho-Educational Specialists —Behavioral Health Screening, Diagnostic Assessment, Service Plan Development, Individual Psychotherapy, Group Psychotherapy, Family Psychotherapy, Crisis Management

Licensed Independent Social Worker Clinical Practice (LISW-CP) Master's or Doctoral degree from a Board approved social work program. Licensed by SC Board of Social Work Examiners —Behavioral Health Screening, Diagnostic Assessment, Service Plan Development, Individual Psychotherapy, Group Psychotherapy, Family Psychotherapy, Crisis Management

Licensed Masters Social Worker (LMSW) Master's or a doctoral degree from a social work program, accredited by the Council on Social Work Education and one year of experience working with the population to be served. Licensed by SC Board of Social Work Examiners —Behavioral Health Screening, Diagnostic Assessment**, Service Plan Development, Individual Psychotherapy*, Group Psychotherapy*, Family Psychotherapy*, Crisis Management

Licensed Marriage and Family Therapist (LMFT) A minimum of 48 graduate semester hours or 72 quarter hours in marriage and family therapy along with an earned master's degree, specialist's degree, or doctoral degree. Each course must be a minimum of at least a 3-semester hour graduate level course with a minimum of 45 classroom hours of 4.5 quarter hours; one course cannot be used to satisfy two different categories. Licensed by SC Board of Examiners for Licensure of Professional Counselors, Marriage and Family Therapists and Psycho-Educational Specialists —Behavioral Health Screening, Diagnostic Assessment, Service Plan Development, Individual Psychotherapy, Group Psychotherapy, Family Psychotherapy, Crisis Management

Licensed Professional Counselor (LPC) A minimum of 48 graduate semester hours during a master's degree or higher degree program and have been awarded a graduate degree as provide in the regulations, or a post-degree program accredited by the commission on Accreditation for Marriage and Family Therapy Education or a regionally accredited institution of high learning subsequent to receiving the graduate degree. Licensed by SC Board of Examiners for Licensure of Professional Counselors, Marriage and Family Therapist and Psycho-Educational Specialists —Behavioral Health Screening, Diagnostic Assessment, Service Plan Development, Individual Psychotherapy, Group Psychotherapy, Family Psychotherapy, Crisis Management

Certified Substance Abuse Professional Master's degree in counseling, social work, family therapy, nursing, psychology, or other human services field, plus 250 hours of approved training related to the core functions and certification as an addictions specialist SC Association of Alcoholism and Drug Abuse Counselors Certification Commission and/or NAADAC Association for Addiction Professionals —Behavioral Health Screening, Diagnostic Assessment**, Service Plan Development, Individual Psychotherapy*, Group Psychotherapy*, Family Psychotherapy*, Crisis Management

Clinical Chaplain Master of Divinity from an accredited theological seminary and have two years of pastoral experience as a priest, minister, or rabbi and one year of clinical pastoral education that includes a provision for supervised clinical services and one year of experience working with the population to be served Documentation of training and experience —Behavioral Health Screening, Diagnostic Assessment**, Service Plan Development, Individual Psychotherapy*, Group Psychotherapy*, Family Psychotherapy*, Crisis Management

Mental Health Professional (MHP) Master's or doctoral degree from a program that is primarily psychological in nature (e.g., counseling, guidance, or social science equivalent) from an accredited university or college and one year of experience working with the population to be served DHHS-approved credentialing program —Behavioral Health Screening, Diagnostic Assessment**, Service Plan Development, Individual Psychotherapy*, Group Psychotherapy*, Family Psychotherapy*, Crisis Management

PARAPROFESSIONAL

Peer Support Specialist High school diploma or GED equivalent peer support providers must successfully complete a pre-certification program that consists of 40 hours of training. The curriculum must include the following topics: recovery goal setting; wellness recovery plans, problem solving; person centered services; and advocacy. Additionally, peer support providers must complete a minimum of 20 hours of continuing education training annually, of which at least 12 hours must be face-to-face training. Certification as a Peer Support Specialist Under the supervision of a master's level clinical professional or licensed practitioner of the healing arts (LPHA) —Peer Support Services

State of South Carolina

1905(a)(29) Medication-Assisted Treatment (MAT)

Amount, Duration, and Scope of Medical and Remedial Care Services Provided to the Categorically Needy (continued)

iv. Utilization Controls

The state has drug utilization controls in place. (Check each of the following that apply)

- Generic first policy
- Preferred drug lists
- Clinical criteria
- Quantity limits

The state does not have drug utilization controls in place.

v. Limitations

Describe the state's limitations on amount, duration, and scope of MAT drugs, biologicals, and counseling and behavioral therapies related to MAT.

1. Limitations on amount, duration, and scope of MAT drugs, biologicals: There are no limitations on amount, duration and scope of MAT drugs, biologicals. However, there are limitations on practitioners eligible to prescribe MAT drugs (Methadone, Buprenorphine and Naltrexone). Practitioners eligible to prescribe such drugs as noted above are:
 - Methadone must be prescribed and administered by an Opioid Treatment Program.
 - Buprenorphine can be prescribed and administered by certain physicians, clinical nurse specialists, certified registered nurse anesthetists, and certified nurse midwives.
 - Naltrexone can be prescribed and administered by any clinician who is licensed in the state to prescribe medications.
2. Limitations on amount duration and scope of counseling and behavioral therapies related to MAT: Beneficiaries receiving MAT services are able to receive all behavioral therapies in the South Carolina State Plan as long as medical necessity is met. Most services have service frequency caps that can be amended if medical necessity dictates.

State of South Carolina

1905(a)(29) Medication-Assisted Treatment (MAT)

Amount, Duration, and Scope of Medical and Remedial Care Services Provided to the Categorically Needy (continued)

TN No. 21-0003

Approval Date 09/30/21

Effective Date 10/01/20

Supersedes

TN No: New Page

PRA Disclosure Statement - This information is being collected to assist the Centers for Medicare & Medicaid Services in implementing section 1006(b) of the SUPPORT for Patients and Communities Act (P.L. 115-271) enacted on October 24, 2018. Section 1006(b) requires state Medicaid plans to provide coverage of Medication-Assisted Treatment (MAT) for all Medicaid enrollees as a mandatory Medicaid state plan benefit for the period beginning October 1, 2020, and ending September 30, 2025. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid Office of Management and Budget (OMB) control number. The OMB control number for this project is 0938-1148 (CMS-10398 # 60). Public burden for all of the collection of information requirements under this control number is estimated to take about 80 hours per response. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to CMS, 7500 Security Boulevard, Attn: Paperwork Reduction Act Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.